

2022 Messaging Guidebook for Black and African American People



Messages to Motivate for Colorectal Cancer Screening

June 21, 2022, 12:00pm ET



Purpose of Today's Webinar

- Introduce the ***2022 Messaging Guidebook for Black & African American People: Messages to Motivate for Colorectal Cancer Screening***
- Provide an overview of recent market research on perceptions and barriers to colorectal cancer (CRC) screening
- Introduce preferred messaging channels and trusted sources for CRC information
- Share top-ranked CRC screening messages
- Discuss an upcoming publication and additional resources
- Q&A



Thank You, Quest Diagnostics!

The NCCRT would like to thank **Quest Diagnostics** for providing funding, guidance, and support to conduct the market research and to develop the Guidebook.



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Our Presenters



Kaitlin Sylvester, MPA

Director, National Colorectal Cancer Roundtable- Programs & Partnerships



Folasade (Fola) P. May, MD, PhD, MPhil

Director of Gastroenterology Quality, UCLA Health



Michelle Aubertine, MBA

Project Consultant, KS&R



Adjoa Anyane-Yeboah, MD, MPH

*Gastroenterologist,
Massachusetts General Hospital,
Harvard Medical School*



The National Colorectal Cancer Roundtable (NCCRT)

The **NCCRT** is a national coalition of public, private, and voluntary organizations dedicated to reducing the incidence of and mortality from colorectal cancer in the U.S., through coordinated leadership, strategic planning, and advocacy.

The ultimate goal is to increase the use of proven colorectal cancer screening tests among the entire population for whom screening is appropriate.



Convene → Identify → Collaborate



NCCRT History, Members, and Operations

- Co-founded by the ACS and the CDC in 1997
- Collaborative partnership of 150+ member organizations
- Members include nationally known experts, thought leaders, and decision makers
- Work is conducted year-round by Strategic Priority Teams and in Special Topic Meetings
- Each year the **NCCRT Annual Meeting** addresses important topics and sets the agenda for the following year



80% in Every Community

80% in Every Community is an NCCRT campaign to substantially reduce colorectal cancer as a major public health problem.

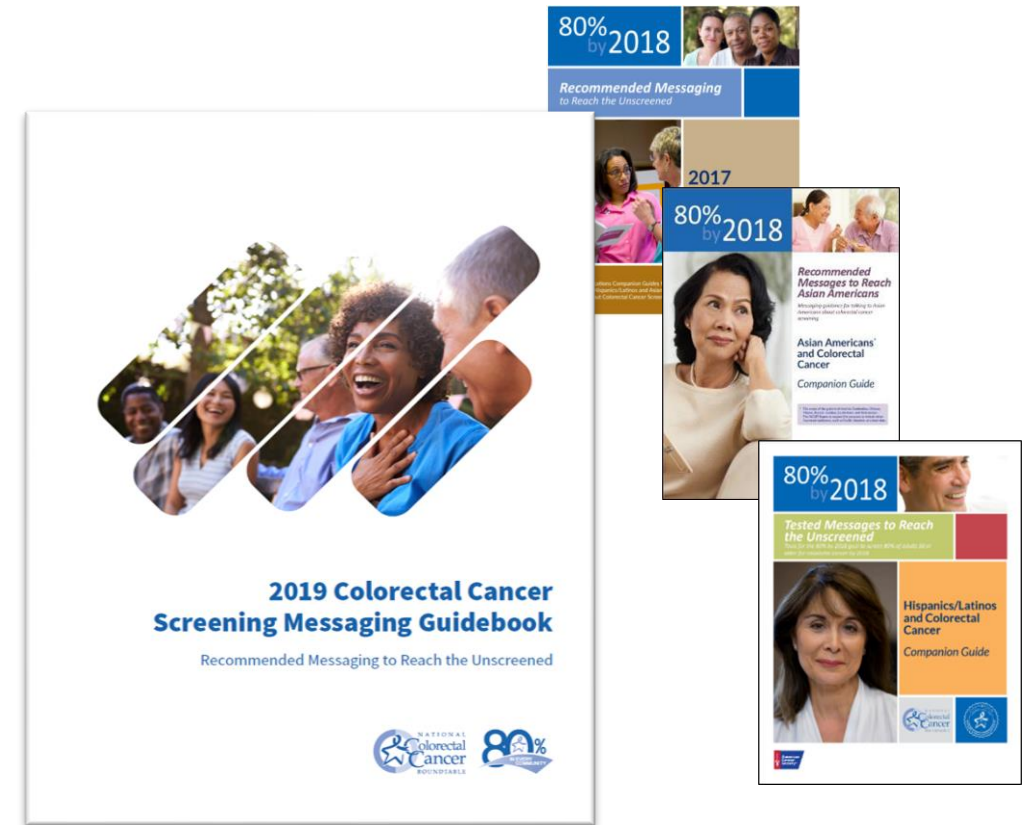
- This initiative emphasizes evidence-based colorectal cancer screening activities that respond to individualized needs, barriers, and motivations within a community.
- 1,800 organizations have signed the 80% pledge.
- We are seeing that 80% and higher screening rates are possible.
- Too many communities are not benefiting equally, and we intend to continue this work until we see every community achieve 80% screening rates.



History of Screening Market Research

In 2014, NCCRT conducted its first market research project

- Released the *80% by 2018 NCCRT Communications Guidebook*
- *Asian Americans and Colorectal Cancer Companion Guide* and the *Hispanics/Latinos and Colorectal Cancer Companion Guide*.
- *The NCCRT Colorectal Cancer Screening Messaging Guidebook: Recommended Messaging to Reach the Unscreened* was released in 2019



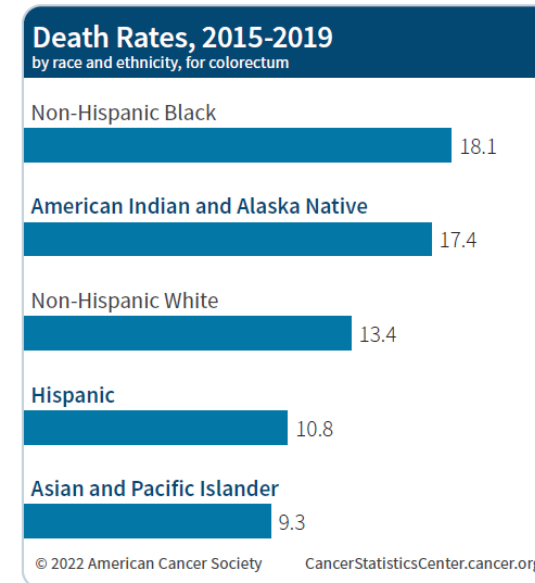
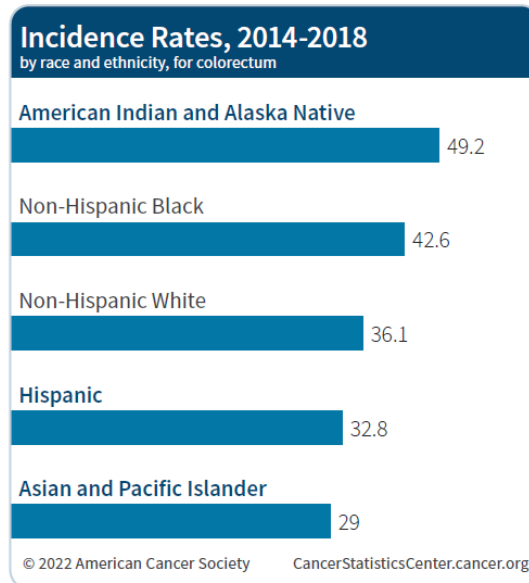
National Data on Screening & Cancer Rates

Over the last two decades, colorectal cancer screening rates among average-risk Black adults doubled from **32%** to **65%**. In 2018, **57%** of those aged 45 and older were up to date on screening. While these rates are similar to those of White adults, colorectal cancer incidence and mortality rates are higher in Black communities.

Prevalence (%) of U.S. Colorectal Cancer Screening (2018)*		
	Black	White
Adults 50+ Years	65	68
• Male	64	69
• Female	66	66
Adults 45+ Years	57	58
• Male	58	59
• Female	57	57

* For age ≥45 and ≥50 years: FOBT/FIT, sigmoidoscopy, colonoscopy, computed tomography (CT) colonography, OR sDNA test in the past 1, 5, 10, 5 and 3 years, respectively, OR sigmoidoscopy in the past 10 years with FOBT/FIT in the past 1 year.

ACS Cancer Facts and Figures for African American/Black People 2022-2024



New Market Research

In 2021, the NCCRT and the American Cancer Society conducted research on perceptions of colorectal cancer screening among unscreened Black and African American people. The overall goals of the research were to:

- ✓ Gain a deeper understanding of the barriers to being screened
- ✓ Understand health care behaviors and perceptions
- ✓ Understand how systemic racism and social injustice impact the Black community's experiences within the healthcare system
- ✓ Uncover different motivators to encourage screening
- ✓ Identify preferred and trusted information sources
- ✓ Gather reactions to potential messaging and messaging aspects to identify what elements of messaging will be most effective

Market Research Overview and Methodology

Phase 1: In-Depth Interviews

Objectives included:

- Digging deeper into the barriers to getting screened
- Understanding the role systemic racism and social injustice plays in the experiences the black community has with the healthcare system
- Gain reactions to potential messaging to identify what elements of messaging will be most effective

Methodology:

60-minute virtual interviews with Black and African American people, 45+ years old, who have not been screened for colorectal cancer.

- A total of 10 respondents
- 6 male, 4 female
- Ages from 45-66

Phase 2: Message Testing

Objectives included:

- Test the 15 messages the team crafted based on prior years' research findings and the phase 1 interviews.
- Identify which messages are most effective in motivating Black and African American people to get screened.

Other objectives included:

- Quantitatively validate barriers to screening
- Identify preferred and trusted information sources
- Understand health care behaviors and perceptions

Methodology:

15-minute unbranded, online survey with a total of 490 Black and African American people ages 45+, who have not been screened for colorectal cancer.

“When I say colon cancer or colorectal cancer, what comes to mind? What makes you say that?”



Market Research Results

Key Findings

- Deferment is the top reason for having not been screened yet.
- About 1 in 3 reports racial bias in health care that makes them hesitant to seek medical care.
- The majority of those under the age of 55 have not had any discussions with their healthcare providers about CRC screening.
- Just over half of those 55+ have discussed screening with their healthcare providers.

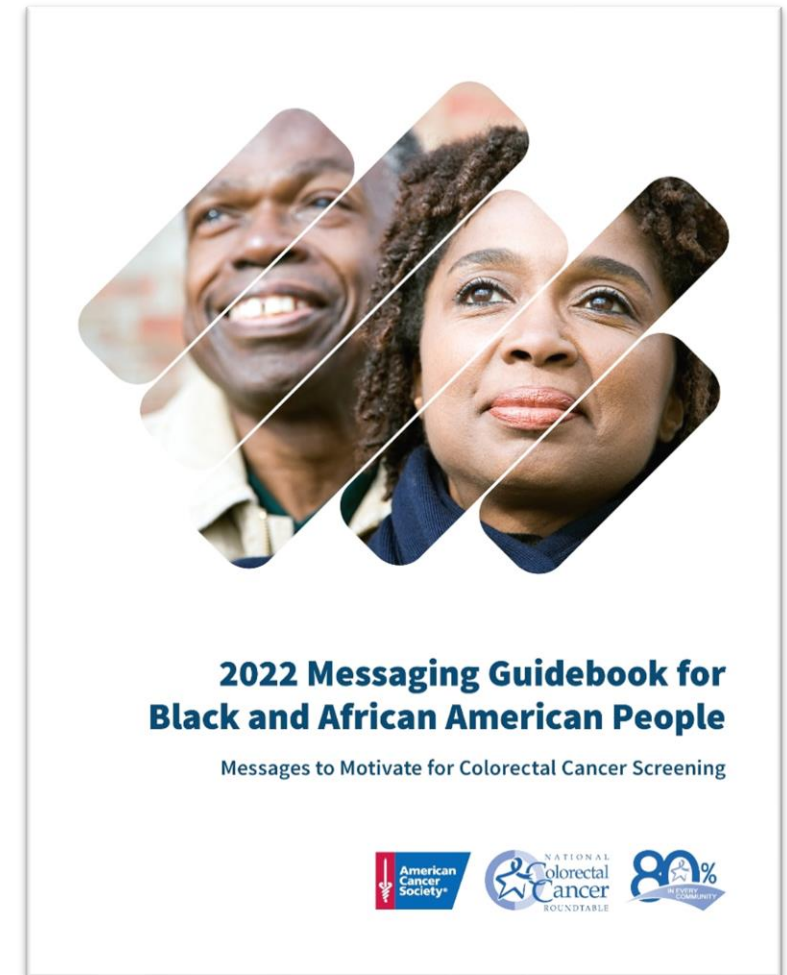
RACISM AS A BARRIER TO HEALTH CARE

1 in 3 people responded that they were at least somewhat hesitant to seek medical care due to racism in health care and some shared personal experiences where the care they received had been impacted because of racism.

Others point out that although they may not have personal experiences with differential treatment based on their race, they know of people who have been impacted. Regardless of personal experience, almost all respondents indicate there is room for improvement in the healthcare system to address racism and its impact on care. Our research shows medical doctors not recommending screening as a top barrier. Bias may play a role in the lack of recommendation.




NCCRT's New 2022 Messaging Guidebook

- Includes an overview of perception and attitudes about personal health and CRC screening
- Shares top identified barriers to CRC screening
- Preferred message delivery channels and top trusted sources for relaying health-related information
- Introduces top four preferred screening messages from the market research
- Spotlight four groups of focus



**Set to be released in the next two weeks*

Perceptions and Attitudes about Personal Health

		
Perceptions About Own Health	Insurance & Medical Home	Seeking Medical Care
<ul style="list-style-type: none">• 87% say they care a great deal about maintaining their health.• 75% say they know what they need to do to stay healthy.• 62% consider themselves healthy	<ul style="list-style-type: none">• 84% have health insurance coverage• 90% of the insured have a primary care provider.• 57% communicate with their doctor through a patient health Portal	<ul style="list-style-type: none">• 65% of female respondents and 51% of males say they get regular check-ups/screenings/wellness care, whether sick or not• 58% say they get a physical each year• 37% say they only visit the doctor's office when they are sick• 33% say they avoid going to the doctor as much as possible

Top-of-Mind Thoughts About CRC and CRC Screening

Suffering caused by CRC is unbearable

CRC is one of the more unpleasant forms of cancer and results in death

Moderate chance of survival if diagnosed with CRC

Discomfort, both mentally and physically associated with screening exams

Those with a family history of CRC acknowledged screening is important, despite not having completed screening themselves

Beliefs that living a healthy lifestyle reduces one's risk of CRC

CRC is common among men, but women can also be diagnosed with it

Barriers to CRC Screening

TOP REASONS FOR DELAYING SCREENING

Deferment: This was the leading barrier to screening. Besides COVID-19, the top reasons for delaying screening included financial concerns, test prep, concerns or fears about the test itself, and concerns or fears about the test results, and not thinking one is likely to develop colorectal cancer.

No Family History & No Symptoms: Some believe that it is not necessary to be screened for colorectal cancer without a family history. Others thought there is no need to screen if no symptoms are present.

Doctor Did Not Recommend It: A doctor's recommendation was the top motivator for screening, and many will not seek screening if their medical doctor does not recommend it.

44% fear the actual procedure to test for CRC



COVID-19

23%

of surveyed respondents indicated COVID-related concerns as the top reason they delayed screening.

The COVID-19 pandemic has had devastating effects across the United States and the world. Aside from catastrophic numbers of severe illnesses and death directly related to the virus, other health-related consequences will be felt for years to come.

Early in the pandemic, the Centers for Medicare & Medicaid Services, the American Cancer Society, and gastroenterology associations recommended delaying all non-urgent procedures, including regular colorectal cancer screening. This necessary step to combat the spread of the virus resulted in screening delays and decreased screening rates and has helped exacerbate already-existing disparities in the healthcare system.

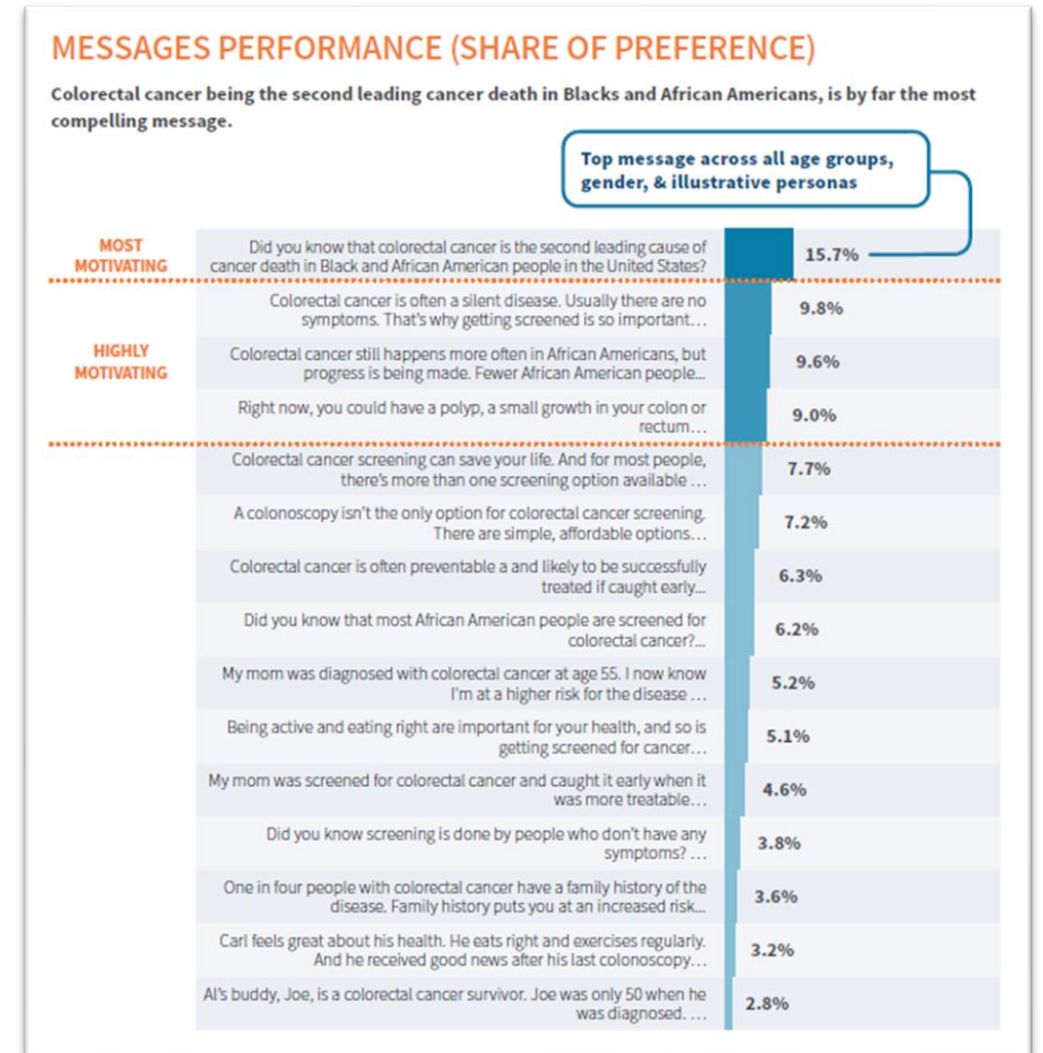
More work needs to be done to help close the screening gap that resulted from the pandemic.

Preferred Message Testing

Fifteen crafted messages were tested using an advanced analytics to measure which were most impactful in encouraging unscreened Black and African American people to get screened for CRC.

Message Themes:

- Preventable and treatable if caught early
- Silent disease
- Family history
- Screening options
- Cancer facts related to Black and African American communities



Preferred Screening Messages

#1

Did you know that colorectal cancer is the second leading cause of cancer death in Black and African American people in the United States? Colorectal cancer can be caught early or even prevented through regular screening. Most people should begin screening at age 45.

#2

Colorectal cancer is often a silent disease. Usually there are no symptoms. That's why getting screened is so important. Screening can help prevent colorectal cancer or catch it early when it is easiest to treat. Most people should begin screening at age 45.

#3

Colorectal cancer still happens more often in Black and African American people, but progress is being made. Fewer Black and African American people develop or die from colorectal cancer as compared to just a few years ago, thanks to more Black and African American people taking part in screening, which now starts at age 45.

#4

Right now, you could have a polyp, a small growth in your colon or rectum. Right now, your polyp may be harmless, but over time it could develop into colorectal cancer. Right now, through regular screening, you have the power to find and remove precancerous polyps and prevent colorectal cancer. Call your doctor and take control of your health!

Top Tested Message: *Did you know that colorectal cancer is the second leading cause of cancer death in Black and African American people in the United States? Colorectal cancer can be caught early or even prevented through regular screening. Most people should begin screening at age 45.*

Why it resonated:

"It is a good warning for Black people. I know that health care for us is very different in this country. I appreciate knowing that colorectal cancer should be more of a concern for Black people."

"Being African American myself, I know that whether I have a family history or not my chances are much greater than other races of people."

"The fact that I'm African American and colorectal cancer is the second leading cause of death for AA is enough to motivate me to get screened."

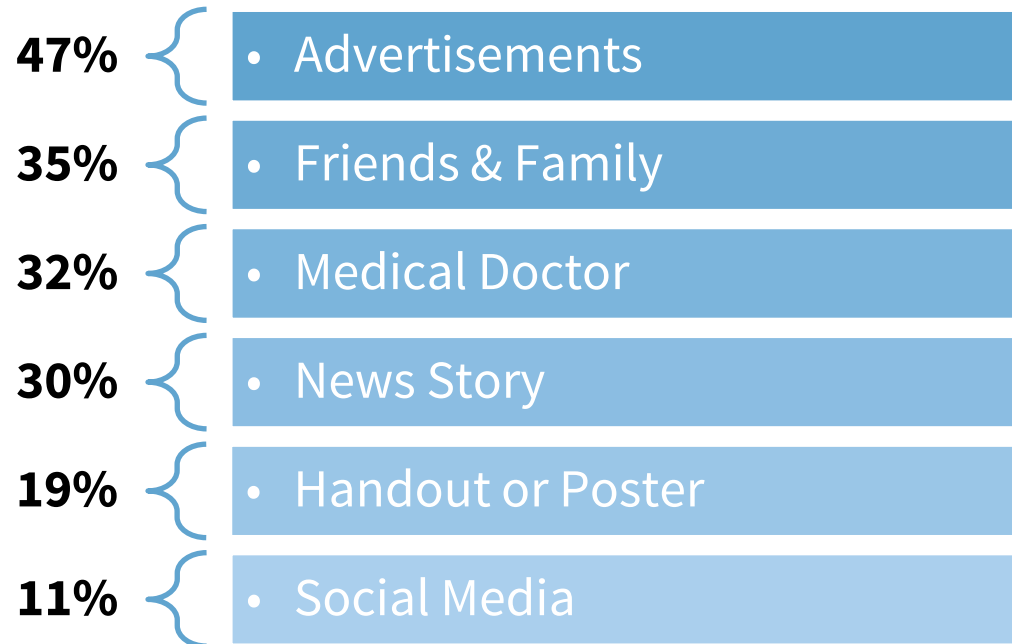
"Because it sounds like it's speaking straight to me."

"It was relatable. I'm Black and it talked about Blacks having a high rate of colorectal cancer and that we should get tested."



Message Delivery: Primary Channels & Trusted Sources for Receiving CRC Screening Information

Where People Receive CRC Information



Most Trusted Sources for CRC Information



We also spotlighted four groups where messaging could be very impactful:

People Who Feel Impervious



Less likely to get screened because they have no symptoms and no family history

They feel they are less likely to develop CRC

Only ½ have talked to their doctor

People Who Are Fearful



Have heard screening can be unpleasant

Feel embarrassed about the prep and screening tests

Afraid to find out if they have cancer

People Who Have Cost Concerns



Often do not have health insurance

Cannot afford out-of-pocket costs

Concerned about treatment costs if cancer is found

People Who Are Busy



Focused on other health issues

Prioritize the health concerns of those close to them

Unable to take off work or make time for screening due to other obligations

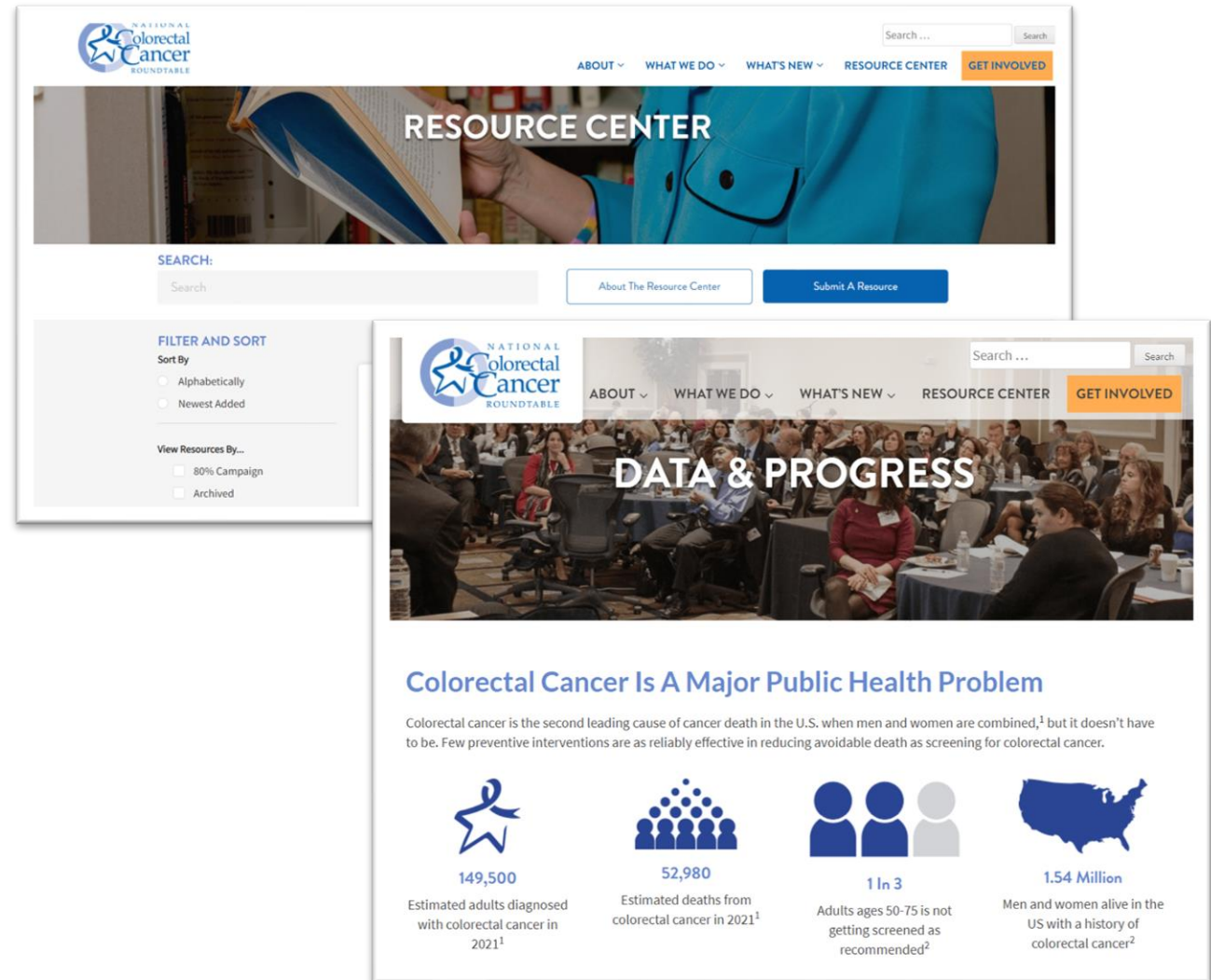
Upcoming Publication & Next Steps

- New publication on NCCRT market research
- New ***Messaging Guidebook*** to be released to the public in the next few weeks
- Next steps:
 - Use research to help change the way healthcare providers discuss CRC screening with patients
 - Tailor top messages to individual communities
 - Have greater focus on the entire continuum of care to reduce and eliminate CRC-related disparities



The NCCRT Resource Center & Data Page

- The **NCCRT Resource Center** contains evidence-based resources and tools to help you increase quality colorectal cancer screening in a range of settings and populations.
- The **NCCRT Data & Progress webpage** provides up-to-date statistics on colorectal cancer screening, incidence, mortality, and geographic distribution information.

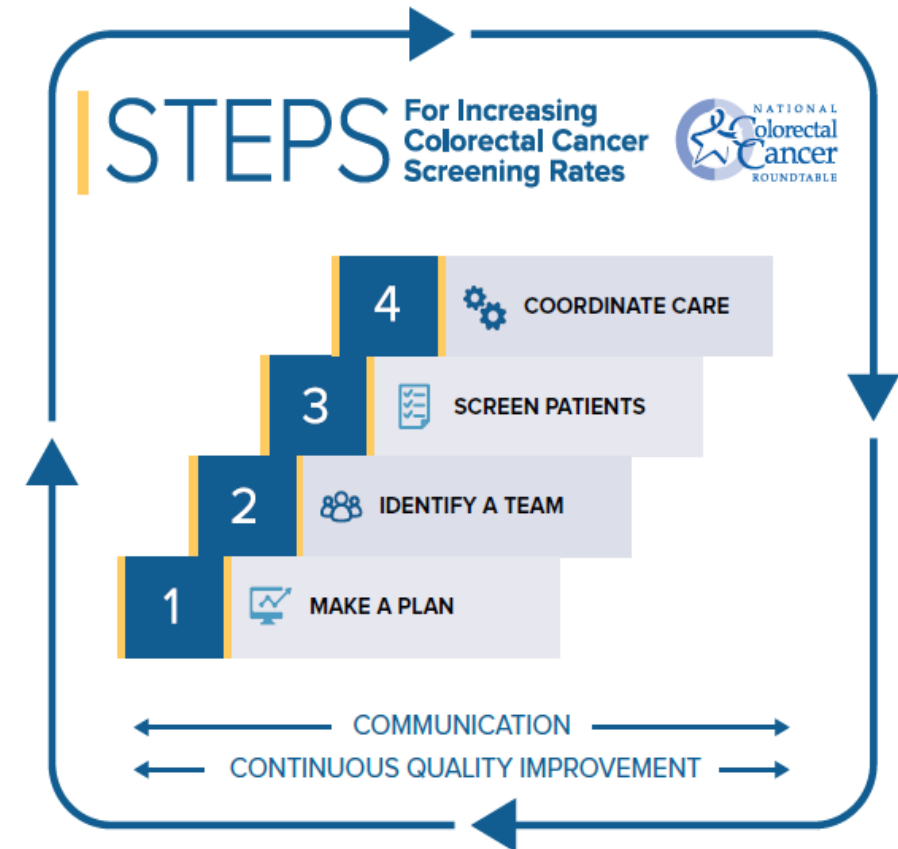


Upcoming NCCRT Resource Release

The newly updated **NCCRT Steps Guide** includes:

- Latest science and best practices
- Current guidelines and test options
- Expert-endorsed strategies
- 10 case studies of exemplary practice sites
- Samples, templates, and tools

Register for the webinar release: nccrt.org/events
July 25, 2022 - 1:00-2:00 PM ET



Please put your questions in the Q&A box!

Q&A



Learn More!

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Thank You!



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Questions? Contact nccrt@cancer.org